

May 8, 2002

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Box Fee Amendment
Assistant Commissioner for Patents
Washington, D.C. 20231

Re: U.S. Patent Application No. 09/701739
Filed: June 3, 1999 (I.A. filing date)

Dear Sir/Madam:

Enclosed please find:

1. Transmittal form
2. Fee Transmittal form;
3. Patent Application Fee Determination Record;
4. Preliminary Amendment
5. Addressed Return Postcard

Please deduct any additional fees that may be due to Kinetic Concept, Inc.'s deposit account no. 500-326.

Respectfully submitted,

Eric W. Cernyar
Reg. No. 45,919
(210) 863-0063 (cell number)

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PTO/SB/17 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL
for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) **948.00****Complete if Known**

| | |
|----------------------|------------|
| Application Number | 09/701739 |
| Filing Date | 06/03/1999 |
| First Named Inventor | Connolly |
| Examiner Name | Alvarado |
| Group Art Unit | 3628 |
| Attorney Docket No. | ROT.503 |

METHOD OF PAYMENT

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **500-326**
Deposit Account Name **Kinetic Concepts, Inc.**

- ☒
- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☐
- Payment Enclosed:**

☐ Check ☐ Credit card ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

| | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
|-----|----------------------------|----------------------------|------------------------|----------|
| 101 | 740 | 201 370 | Utility filing fee | |
| 106 | 330 | 206 165 | Design filing fee | |
| 107 | 510 | 207 255 | Plant filing fee | |
| 108 | 740 | 208 370 | Reissue filing fee | |
| 114 | 160 | 214 80 | Provisional filing fee | |

SUBTOTAL (1) (\$) **2. EXTRA CLAIM FEES**

| | Total Claims | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|--------------|----------------|----------|
| Independent Claims | 56 | -20** = 34 | 18.00 | 612.00 |
| Multiple Dependent | 7 | -3** = 4 | 84.00 | 336.00 |

| | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description |
|-----|----------------------------|----------------------------|--|
| 103 | 18 | 203 9 | Claims in excess of 20 |
| 102 | 84 | 202 42 | Independent claims in excess of 3 |
| 104 | 280 | 204 140 | Multiple dependent claim, if not paid |
| 109 | 84 | 209 42 | ** Reissue independent claims over original patent |
| 110 | 18 | 210 9 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$) **948.00**

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

| | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
|-----|----------------------------|----------------------------|--|----------|
| 105 | 130 | 205 65 | Surcharge - late filing fee or oath | |
| 127 | 50 | 227 25 | Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | 139 130 | Non-English specification | |
| 147 | 2,520 | 147 2,520 | For filing a request for <i>ex parte</i> reexamination | |
| 112 | 920* | 112 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 1,840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 55 | Extension for reply within first month | |
| 116 | 400 | 216 200 | Extension for reply within second month | |
| 117 | 920 | 217 460 | Extension for reply within third month | |
| 118 | 1,440 | 218 720 | Extension for reply within fourth month | |
| 128 | 1,960 | 228 980 | Extension for reply within fifth month | |
| 119 | 320 | 219 160 | Notice of Appeal | |
| 120 | 320 | 220 160 | Filing a brief in support of an appeal | |
| 121 | 280 | 221 140 | Request for oral hearing | |
| 138 | 1,510 | 138 1,510 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 55 | Petition to revive - unavoidable | |
| 141 | 1,280 | 241 640 | Petition to revive - unintentional | |
| 142 | 1,280 | 242 640 | Utility issue fee (or reissue) | |
| 143 | 460 | 243 230 | Design issue fee | |
| 144 | 620 | 244 310 | Plant issue fee | |
| 122 | 130 | 122 130 | Petitions to the Commissioner | |
| 123 | 50 | 123 50 | Processing fee under 37 CFR 1.17(q) | |
| 126 | 180 | 126 180 | Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 40 | Recording each patent assignment per property (times number of properties) | |
| 146 | 740 | 246 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 | 740 | 249 370 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 | 740 | 279 370 | Request for Continued Examination (RCE) | |
| 169 | 900 | 169 900 | Request for expedited examination of a design application | |

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

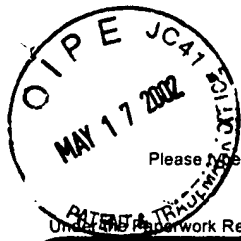
SUBTOTAL (3) (\$) **SUBMITTED BY****Complete (if applicable)**

| | | | | | |
|-------------------|------------------------|-----------------------------------|------------|-----------|----------------|
| Name (Print/Type) | Eric W. Cernyar | Registration No. (Attorney/Agent) | 45,919 | Telephone | (210) 590-9473 |
| Signature | <i>Eric W. Cernyar</i> | Date | 05/07/2002 | | |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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Please use a plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)
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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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| | | |
|---|----------------------|--------------------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Applicati n Number | 09/701739 |
| | Filing Date | 6/3/1999 (I.A. filing date) |
| | First Named Inventor | Connolly |
| | Group Art Unit | 3628 |
| | Examiner Name | Winston M. Alvarado |
| Total Number of Pages in This Submission 40 38 | | Attorney Docket Number ROT.503 |

| ENCLOSURES (check all that apply) | | |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment / Reply | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | return postcard |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | patent app feed back record |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | Remarks | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|------------------------|
| Firm or Individual name | Eric W. Cernyar |
| Signature | <i>Eric W. Cernyar</i> |
| Date | May 8, 2002 |

| CERTIFICATE OF MAILING | |
|--|------------------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: May 8, 2002 | |
| Typed or printed name | Eric W. Cernyar |
| Signature | <i>Eric W. Cernyar</i> |
| Date | May 8, 2002 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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